POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	mesay		08-17-01
O.I.P.E. CLASSIFIER		19	8 2201
FORMALITY REVIEW	MW	920	0917-01
RESPONSE FORMALITY REVIEW	JK	B35	02/28/02

INDEX OF CLAIMS

✔	Rejected	N	Non-elected
=	Allowed	I	Interference
—	(Through numeral)... Canceled	A	Appeal
÷	Restricted	O	Objected

Claim			Date							
Final	Original									
1	J	J	J							
2	J	J								
3	J	J								
4	J	J	J							
5	J	J	J							
6	J	J	J							
7										
8										
9										
10										
11	J	J	J							
12	J									
13	J									
14	J									
15	J	J	J							
16	J	J	J							
17	J	J	J							
18	J	J								
19	J									
20	J									
21	J									
22	J	J	J							
23	J	J	J							
24	J	J	J							
25	J	J	J							
26	J	J	J							
27	J	J	J							
28	J	J	J							
29										
30										
31										
32										
33	✔	J	J							
34	J	J	J							
35	J	J	J							
36	J									
37	J	J								
38	J	J								
39		J								
40	J	J								
41	J	J								
42			J							
43			J							
44			J							
45			J							
46			J							
47			J							
48			J							
49			J							
50			J							

Claim			Date							
Final	Original									
51	J	J								
52	J	J								
53	J	J								
54	J	J								
55	J	J								
56	J	J								
57		J								
58		J								
59	J	J								
60		J								
61		J								
62		J								
63		J								
64		J								
65		J								
66		J								
67		J								
68		J								
69		J								
70		J								
71		J								
72		J								
73		J								
74		J								
75		J								
76		J								
77		J								
78		J								
79		J								
80		J								
81		J								
82		J								
83		J								
84										
85										
86										
87										
88										
89										
90										
91										
92										
93										
94										
95										
96										
97										
98										
99										
100										

Claim			Date							
Final	Original									
101										
102										
103										
104										
105										
106										
107										
108										
109										
110										
111										
112										
113										
114										
115										
116										
117										
118										
119										
120										
121										
122										
123										
124										
125										
126										
127										
128										
129										
130										
131										
132										
133										
134										
135										
136										
137										
138										
139										
140										
141										
142										
143										
144										
145										
146										
147										
148										
149										
150										

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)